CUSTOMER SERVICE APPLICATIONComplete the following information to the best of your ability so that we may better serve you.



E-911 Physical/Mailing Addres	FAX (910)94 tcummings @moorecou	Contact Info - Phone (910)947-5010 FAX (910)947-1303 tcummings @moorecountync.gov		
TODAY'S DATE:	TIME:	AM or PM		
NAME (name of person filling out this	application today)			
(email address)	(phone#)	(phone#) (fax#)		
LOCATION OF PROPERTY and	PROPERTY OWNER'S NAME			
YOU ARE HERE TODAY FOR Zoning Permit	: (mark all that apply) ☐ Request Information	□ Plat/Map Drop-Off		
Residential/Agricultural Site-Built Home Modular Home Manufactured Home Replace Manufactured Home	Business Use ☐ Business — Commercial ☐ Business — Industrial ☐ Home Occupation ☐ Sign	Surveys/Plats ☐ Review Officer ☐ Subdivision Level 1 / Level 2 Major / Exempt		
 □ Addition(s) □ Accessory Building □ Pool □ Agriculture/Horses 		GIS ☐ Address Within City ☐ Map from GIS ☐ Road/Street Renaming ☐ CD/DVD Data		
Board Activities ☐ Rezone Request ☐ Variance/Appeal ☐ Si	onditional Use	* *		
Complaint/Receive Information ☐ Zoning Complaint ☐ Nuisance Complaint ☐ Copy Moore County Zoning Or ☐ Copy Moore County Subdivision	☐ Water District Inf☐ CDBG/Grants dinance	mmunity Development formation □ Census		
	FOR OFFICE USE ONLY:			

Zoning District	Setbacks (F)	(S)	(R)	DATE/TIME ACTION COMPLETE: